

Special Bulletin

Purchase of Medical Care Services N.C. Department of Health and Human Services Office of the Controller

JUNE, 2003

PURCHASE OF MEDICAL CARE SERVICES PAYMENT PROGRAMS

The information in this bulletin pertains to the following fee-for-service reimbursement programs of the N.C. Department of Health and Human Services:

Adult Cystic Fibrosis Program	HIV Medications Program
Assistive Technology Program	Kidney Program
Cancer Program	Migrant Health Program
Children's Special Health Services (CSHS)	Sickle Cell Program

NEW INCOME SCALES

Attached is a table showing the updated income scales for the programs listed above. These scales are effective for dates of service on and after July 1, 2003. The HIV Medications Program scale was effective April 1, 2003. Please note that the Cancer Program scale is for gross income; the other scales are for net income.

HIPAA and POMCS PAYMENT PROGRAMS

Purchase of Medical Care Services (POMCS) payment programs do not meet the HIPAA definition of a "provider" that conducts a standard transaction or of a "health plan" or insurance company. Therefore, neither POMCS nor the Office of the Controller is a covered health care component within the Department of Health and Human Services (DHHS). Both offices will adhere to NC DHHS policies, procedures, and practices that are HIPAA compliant. Questions regarding this matter should be directed to the Office of Controller, Privacy Coordinator at 919-715-8613.

HIV PROGRAM

NC HIV Medications Program Coverage for T-20/Fuzeon

Fuzeon is a new self-injectable antiretroviral medication recently approved by the FDA for the use in combination with other antiretroviral agents for the treatment of HIV infection in treatment experienced patients with evidence of unsatisfactory viral control despite their ongoing antiretroviral therapy. Fuzeon is a very complex drug to manufacture, hence it's exceptional cost (~\$20,000 per person per year). Due to production limitations in this first year, it will be available in very limited supply; only about 15,000 patients worldwide will be able to access it in 2003, with 8,000 to 10,000 of those being in the US. *The HIV Medications Program has decided to add Fuzeon to the program formulary under the following conditions:*

1. A separate clinician-initiated application process based on stringent medical eligibility criteria and professional review is being implemented by ADAP to determine client eligibility for this medication;
2. In order to limit the exposure of the ADAP Program to this very high cost medication, the Program will limit access to Fuzeon (when ADAP is the payor source) in the current Program year to twenty-five (25) ADAP clients;
3. Due to the special nature and cost of this drug, the Program intends to serve as a “central pharmacy/purchaser” for Fuzeon and will make the medication available to the selected clients directly through their medical care providers’ office; and,
4. The Program will intensify its Utilization Review process, focusing on both those clients receiving Fuzeon as well as those others currently receiving multiple other antiretroviral medications.

As of this moment, the Program is working to complete the administrative documents and steps necessary to make this medication available to ADAP clients. As soon as that work is completed, notification and information will be sent to providers of HIV/AIDS clinical care and to the HIV community in North Carolina. It is anticipated that T-20/Fuzeon will be on the ADAP Formulary and available to selected ADAP clients by mid-June.

KIDNEY PROGRAM RENEWAL APPLICATIONS

Renewal applications are usually submitted from April through June for the 12-month period beginning in July; however, patients may reapply at any time during the year. If approved, the patient will be eligible for \$300 in condition-related drugs and supplies. Prescriptions are not required for over-the-counter drugs and supplies. When completing the application, please verify the patient’s current address and choice of pharmacy.

CLAIMS SUBMISSION

Remember to submit claims to POMCS in a timely manner to ensure payment from current year budgets and to lessen the impact on the next year’s budgets. New budgets are effective July 1 of each year.

FORMS AVAILABLE ON WEBSITE

The following forms are now available at <http://www.dhhs.state.nc.us/control/>:

- DHHS 3014 Financial Eligibility Application
- DHHS 3056 Authorization Request
- DHHS 3058 Pharmacy Claim
- DHHS 3202 Order Form

These items will be listed under the link to POMCS. Please check this site in the future for additional forms, instructions, and notices.

Eligibility applications and request forms are currently being revised. Check the website in July for updated versions. Updated forms should be substituted for earlier version as soon as they are available.

POMCS Manuals are available by using the Order Form or calling Jean Koger at (919) 855-3672. The manual summarizes the programs, outlines the payment process and includes copies of forms and reference materials.

TIPS COMPLETION OF POMCS FORMS

- Forms should be legible.
- Required fields must be completed or the application will be returned.
- Insurance information (including Medicare) must include policy #, policyholder name and claims address. *Forms with incomplete insurance information will be returned.*
- Alimony and child support must be included as income sources.
- Financial deductions should be included if needed. (Cancer Program does not allow deductions.)
- Terms and conditions on the financial application must be explained to clients.
- HIV Program authorization request forms:
 - Must include CD4 count and viral load.
 - Physician signature required on initial request. PA's and nurse practitioners may sign subsequent requests.
- Submit forms to: **Purchase of Medical Care Services
DHHS – Controller's Office
1904 Mail Service Center
Raleigh, NC 27699-1904**

COMPUTER GENERATED FORMS

POMCS cannot accept electronically submitted forms but does welcome computer-generated forms that are submitted manually. Providers who are interested in developing a computer-generated form should contact POMCS Provider Relations (919-855-3651) to ensure that the forms are formatted according to POMCS standards.

TOLL FREE NUMBERS FOR PATIENT/CLIENT USE

CARELINE (800-662-7030) – Available to North Carolina citizens to contact any state agency.
Cancer Control Program (866-693-2656) – New toll-free PATIENT access line
CSHS Helpline (800-737-3028) – Patient access line

FURTHER INFORMATION

Purchase of Medical Care Services
DHHS Controller's Office
1904 Mail Service Center
Raleigh, NC 27699-1904
(Fax: 919-715-3848) or call:

Authorization Inquiries		919-855-3701
Claims Inquiries		919-855-3702
Unit Supervisor	Richard Moore	919-855-3650
Claims Supervisor	Derrick Stevenson	919-855-3653
Authorization Supervisor	Jenny Seykora	919-855-3652
Provider Relations	Andrea Murphy	919-855-3651

State of North Carolina
Michael F. Easley, Governor
Department of Health and Human Services
Carmen Hooker Odom, Secretary
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